



State of Montana
DEPARTMENT OF CORRECTIONS

PURCHASING CARD NEW ACCOUNT INFORMATION RECORD

COMPLETE INFORMATION IS REQUIRED EXCEPT WHERE NOTED AS OPTIONAL

TO ADD NEW ACCOUNT:

1. Indicate "New Account" under Type of Request.
2. Complete all fields on the form.

TO CHANGE INFORMATION ON AN EXISTING ACCOUNT:

1. Indicate Type of Request.
2. Fill in card account number _____
3. Fill in current name on card:

First Name

Middle Initial

Last Name

4. Complete only the fields to be changed in the following sections.

CARD INFORMATION

First Name - 12 characters
(Embossed on card)

Middle Initial - 1 character
(Embossed on card)

Last Name - 20 characters
(Embossed on card)

Employee ID - 9 characters
(Required)

Organization Name - 19 characters
(User definable - embossed below cardholder name on plastic)

Address - 36 characters

City - 25 characters

State - 2 characters

Zip - 5 characters

Zip Expansion - 4 characters

Monthly Credit Limit - 6 characters

Single Transaction Limit - 6 characters
(Optional)

Home Phone - 10 characters

Business Phone - 10 characters

TYPE OF REQUEST:

- ☐ A. New Account:
☐ B. Address Change
☐ C. Dept./Div./Acct. Code Change
☐ D. Account Closure
☐ E. Name Change
☐ F. Credit Line Adjustment
☐ G. Single Transaction \$ Limit
☐ H. Other

AUTHORIZATION

Employee Signature

Date

Supervisor Signature

Date

Agency Purchasing Card Coordinator Signature

Date

State of Montana
P.O. Box 200135
Helena, MT 59620-0135



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PURCHASING CARD NEW ACCOUNT INFORMATION RECORD

CARDHOLDER NAME _____ EMPLOYEE ID # _____

DEPARTMENT NAME _____ NUMBER _____

Reporting Hierarchy Coding _____

NEW When ordering a Procard on the USB website, use the Optional 1 & Optional 2 fields for the **user ID # of the individual who will be reallocating** in the SABHRS module (ie the Proxy).

Proxy(s)* Name/User ID # _____

NOTE: If the cardholder has more than two proxies, additional user ID's will need to be added in the SABHRS Procard Module.

PROCARD'S DEFAULT ACCOUNTING CODES

Account _____
Business Unit _____
Organization _____
Fund _____
Subclass _____
Project _____

*A proxy is the person(s) who will be editing the accounting codes for this individual cardholder in the SABHRS Procard module.



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